DEPARTMENT OF HEALTH AND HUMAN SERVICES		FORM APPROVED OMB NO. 0938-0193		
HEALTHCARE FINANCING ADMINISTRATION	1. TRANSMITTAL NUMBER:	2. STATE:		
TRANSMITTAL AND NOTICE OF APPROVAL OF	15 - 0003	 Michigan		
STATE PLAN MATERIAL	3. PROGRAM IDENTIFICATION: TITLE XIX			
FOR: HEALTH CARE FINANCING ADMINISTRATION	SECURITY ACT (MEDICAID)			
A DEL S. C. A. DEL	TITLE XIX OF THE SOCIAL SECURITY A	CT (MEDICAID)		
TO: REGIONAL ADMINISTRATOR HEALTH FINANCING ADMINISTRATION	4. PROPOSED EFFECTIVE DATE January 1, 2015			
DEPARTMENT OF HUMAN SERVICES	Variably 1, 2010			
5. TYPE OF PLAN MATERIAL (Check One):				
☐ NEW STATE PLAN ☐ AMENDMENT TO	O BE CONSIDERED AS NEW PLAN	AMENDMENT		
COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN A	MENDMENT (Separate Transmittal for each amend	lment)		
6. FEDERAL STATUTE/REGULATION CITATION:	7. FEDERAL BUDGET IMPACT:			
42 CFR 447	a, FFY 2015 \$0 b, FFY 2016 \$0			
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:	9. PAGE NUMBER OF THE SUPERSEDED F	LAN SECTION		
Attachment 4.19-B, Page 19	OR ATTACHMENT (If Applicable):			
Titus in to the second	Attachment 4.19-B, Page 19			
		-		
10. SUBJECT OF AMENDMENT:				
Update of the Ambulatory Surgical Center (ASC) budget neutrality factor.				
The same of the same same same same same same same sam				
11. GOVERNOR'S REVIEW (Check One):	OTHER, AS SPECIFIED:			
GOVERNOR'S OFFICE REPORTED NO COMMENT COMMENTS OF GOVERNOR'S OFFICE ENCLOSED	Stephen Filton, Director			
NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITT	AL Medical Services Administration	n		
12. SIGNATUE OF STATE AGENCY OFFICIAL:	16. RETURN TO:			
2. SIGNATURE OF STATE AGENCY OF TIGHT.	IO. NETONICTO.			
	Medical Services Administration			
Stenhon Eitten	Actuarial Division - Federal Liaison			
	Capitol Commons Center - 7 th Floor 400 South Pine			
ina i amin'ny aora ao	Lansing, Michigan 48933			
15. DATE SUBMITTED:				
March 30, 2015	Attn; Erin Black			
FOR REGIONAL OFFICE USE ONLY				
17. DATE RECEIVED:	18 DATE APPROVED:			
	PLAN APPROVED - ONE COPY ATTACHED			
19. EFFECTIVE DATE OF APPROVED MATERIAL:	20. SIGNATURE OF REGIONAL OFFICIAL:			
21. TYPE NAME:	22. TITLE:			
23. REMARKS:				
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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State of MICHIGAN

Policy and Methods for Establishing Payment Rates (Other than Inpatient Hospital and Long Term Care Facilities)

24. Ambulatory Surgical Centers

Reimbursement to individual Medicare-certified Ambulatory Surgical Centers (ASCs) for outpatient services provided in the ASC setting on or after January 1, 2011 is calculated by applying the MDCH outpatient prospective payment system (OPPS) reduction factor (RF) to current Medicare ASC reimbursement rates. Medicare ASC rate x RF = Medicaid rate.

State-developed fee schedule rates are the same for both governmental and private ASC providers. The ASC reduction factor is monitored and adjusted in accordance with the OPPS reduction factor schedule. The state maintains an up to date reduction factor history posting on the MDCH website that includes the current OPPS/ASC reduction factor, as well as historical OPPS/ASC reduction factors. As of January 1, 2014 2015 the OPPS/ASC reduction factor is 52.3 53.4%. A wage index of 1.0 is applied for all ASCs. Services paid by Medicare at reasonable cost and contractor priced items are paid by applying the Medicaid state-wide outpatient hospital cost to charge ratio to the Medicare ASC rate. All rates including the ASC wrap list are published on the MDCH website at http://michigan.gov/mdch.

When service coverage or reimbursement methodology differences exist between Medicare and Medicaid, Medicaid fee schedules are used.

TN NO.: <u>15-0003</u>	Approval Date	Effective Date: 01/01/2015
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Supersedes TN No.: 14-04

3990794



Order Confirmation

Ad Order Number 0007202853

Customer

Payor Customer

Account:1000613740

MICHIGAN DEPARTMENT OF COMMUNITY HEALT

PO BOX 30479

(517)241-9444

LANSING M: 48909-7979 USA

Account: 1000813740

MICHIGAN DEPARTMENT OF COMMUNITY HEALTH

PO BOX 30479

LANSING ME 48909-7979 USA

(517)241-9444

PO Number

Sales Rep. kjones

Order Taker kjones

Order Source

Special Pricing

FAX:

smithp2@michigan.gov

Tear Sheets 0

Proofs 0

Affidavits Q

Blind Box

Promo Type

Materials

Invoice Text UPDATE OF OPPS/ASC REDUCTION FACTOR

Net Amount

\$719.32

Tax Amount

\$0,00 \$719.32

Total Amount

Amount Due

Placement/Class Announcements

Ad Size

Ad Attributes

Production Notes

Payment Method Invoice

Payment Amount

POS/Sub-Class Public Notices - Public Notices

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AdNumber 0007202853-01

Color <NONE>

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Color < NONE>

Placement/Class Amountements

Ad Size

Ad Attributes

Production Notes

\$0.00

\$719.32

Ad Schedule

Product Flint Journal

Inserts 1

Cost \$182.13

Ad Type CLS Liner

Pick Up #

External Ad #

Production Method AdBooker

Run Dates Sort Text PUBLICNOTICEMICHIGANDEPARTMENTOFCOMMUNITYHEALTHMEDICALSERVICESADMINISTRATIONUPDATEOFOP

01/18/2015

01/16/2015

Run Dates

01/18/2015

Product MMG_Other Premium

Inserts 1

Cost \$65,39

Ad Type CLS Liner

Pick Up #

External Ad # Production Method AdBooker

Run Dates

Sort Text PUBLICNOTICEMICHIGANDEPARTMENTOFCOMMUNITYHEALTHMEDICALSERVICESADMINISTRATIONUPDATEOFOP

Product Grand Rapids Press # Inserts 1

Cost \$313.85 Ad Type CLS Liner

Pick Up #

External Ad #

Production Method AdBooker

Placement/Class Announcements

POS/Sub-Class Public Notices - Public Notices

AdNumber 0007202853-01

Ad Size 1 X 49.00 H

Ad Attributes

Color < NONE>

Production Notes

Soft Text PUBLICNOTICEMICHIGANDEPARTMENTOFCOMMUNITYHEALTHMEDICALSERVICESADMINISTRATIONUPDATEOFOP

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Inserts 1

Cost \$75.63

Ad Type CLS Liner

Pick Up #

External Ad #

Production Method AdBooker

Run Dates 01/18/2015

Sort Text PUBLICNOTICEMICHIGANDEPARTMENTOFCOMMUNITYHEALTHMEDICALSERVICESADMINISTRATIONUPDATEOFOP

Product Saginaw News

Inserts 1 Cost \$82.32

Ad Type CLS Liner

Pick Up #

External Ad #

Production Method AdBooker

Run Dates 01/18/2015 Placement/Class Announcements

POS/Sub-Class Public Notices Public Notices

AdNumber 0007202853-01

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Ad Attributes

Color <NONE>

Production Notes

Placement/Class Announcements

POS/Sub-Class Public Notices - Public Notices

AdNumber 0007202853-01

Ad Size 1 X 49.00 li

Ad Attributes

Color <NONE>

Production Notes

Soft Text PUBLICNOTICEMICHIGANDEPARTMENTOFCOMMUNITYHEALTHMEDICALSERVICESADMINISTRATIONUPDATEOFOP

0007202853-01

Ad Content Proof

PUBLIC NOTICE Michigan Department of Community Health Medical Services Administration

Update of OPPS/ASC duction Factor

The Michigan Department of Community Health will update the Ambulatory Surgical Center (ASC) and Outpatient Prospective Payment System (OPPS) Reduction factor to maintain budget factor to maintain budget neutrality for the Medicaid program in response to a Medicare rate change. This change will be completed in a manner that is budget neu-tral to the State of Michigan, and is effective January 1, 2015.

Comments

Any comments on, or requests for copies of the No-tice of Proposed Policy may be submitted in writing to: Michigan Michigan Department of Community Health, Actuarial Division, Bureau of Medicaid Policy and Health System In-novation, Attention Ben Ayres, P.O. Box 30479, Lansing, Michigan 48909-7979. Written comments may be reviewed by the public at Capitol Commons Center, 400 South Pine Street, Lansing, Michigan. Request for copies and comments must include the project number. There is no public hearing scheduled for this proposed policy.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State of MICHIGAN

Policy and Methods for Establishing Payment Rates (Other than Inpatient Hospital and Long Term Care Facilities)

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State-developed fee schedule rates are the same for both governmental and private ASC providers. The ASC reduction factor is monitored and adjusted in accordance with the OPPS reduction factor schedule. The state maintains an up to date reduction factor history posting on the MDCH website that includes the current OPPS/ASC reduction factor, as well as historical OPPS/ASC reduction factors. As of January 1, 2014 2015 the OPPS/ASC reduction factor is 52.3 53.4%. A wage index of 1.0 is applied for all ASCs. Services paid by Medicare at reasonable cost and contractor priced items are paid by applying the Medicaid state-wide outpatient hospital cost to charge ratio to the Medicare ASC rate. All rates including the ASC wrap list are published on the MDCH website at http://michigan.gov/mdch.

When service coverage or reimbursement methodology differences exist between Medicare and Medicaid, Medicaid fee schedules are used.

TN NO.: 15-0003 Approval Date ______ Effective Date: 01/01/2015

Supersedes TN No.: 14-04



STATE OF MICHIGAN DEPARTMENT OF COMMUNITY HEALTH

RICK SNYDER GOVERNOR

LANSING

NICK LYON DIRECTOR

January 29, 2015

NAME TITI F **ADDRESS** CITY STATE ZIP

RE:

Dear Tribal Chair and Health Director:

Update of Ambulatory Surgical Center (ASC) and Outpatient Prospective Payment System

(OPPS) Reduction Factor

This letter, in compliance with Section 1902(a)(73) and Section 2107(e)(1)(C) of the Social Security Act. serves as notice of intent to all Tribal Chairs and Health Directors of the request by the Michigan Department of Community Health (MDCH) to submit a State Plan Amendment.

Pending approval by the Centers for Medicare and Medicaid Services, the Michigan Medicaid State Plan will update the ASC and OPPS reduction factor to maintain budget neutrality in response to a Medicare rate change. This change will be effective for dates of service on or after January 1, 2015. The reduction factor will be adjusted from its prior rate of 53.4% to a new rate of 52.3%. This change maintains reimbursement from Medicaid for outpatient services and ambulatory surgical centers at the rate for prior years. The State of Michigan expects these changes will have little or no impact on tribal members.

There is no public hearing scheduled for this State Plan Amendment. Input regarding this Amendment is highly encouraged, and comments regarding this Notice of Intent may be submitted to Lorna Elliott-Egan, MDCH Liaison to the Michigan Tribes. Lorna can be reached at (517) 373-4963 or via e-mail at Elliott-EganL@michigan.gov. Please provide all input by March 1, 2015.

In addition, MDCH is offering to set up group or individual meetings for the purposes of consultation in order to discuss this Amendment, according to the tribes' preference. This consultation meeting will allow tribes the opportunity to address any concerns and voice any suggestions, revisions, or objections to be relayed to the author of the proposal. If you would like additional information or wish to schedule a consultation meeting, please contact Lorna Elliott-Egan at the telephone number or email address provided above.

L 15-08 January 29, 2015 Page 2

MDCH appreciates the continued opportunity to work collaboratively with you to care for the residents of our state.

Sincerely,

Stephen Fitton, Director

Medical Services Administration

cc: Leslie Campbell, Region V, CMS Pamela Carson, Region V, CMS

Ashley Tuomi, MHPA, Executive Director, American Indian Health and Family Services of Southeastern Michigan

L. John Lufkins, Executive Director, Inter-Tribal Council of Michigan, Inc. Jenny Jenkins, Acting Area Director, Indian Health Service - Bemidji Area Office Lorna Elliott-Egan, MDCH

Distribution List for L 15-08 January 29, 2015

Mr. Levi Carrick, Sr., Tribal Chairman, Bay Mills Indian Community

Ms. Vicki Newland, Health Director, Bay Mills (Ellen Marshall Memorial Center)

Mr. Alvin Pedwaydon, Tribal Chairman, Grand Traverse Band Ottawa & Chippewa Indians

Ms. Loi Chambers, Health Director, Grand Traverse Band Ottawa/Chippewa

Mr. Kenneth Meshigaud, Tribal Chairman, Hannahville Indian Community

Ms. G. Susie Meshigaud, Health Director, Hannahville Health Center

Mr. Donald Shalifoe Sr., President, Keweenaw Bay Indian Community

Ms. Carole LaPointe, Health Director, Keweenaw Bay Indian Community - Donald Lapointe Health/Educ Facility

Mr. James Williams, Jr., Tribal Chairman, Lac Vieux Desert Band of Lake Superior Chippewa Indians

Ms. Sadie Valliere, Health & Human Services Director, Lac Vieux Desert Band

Mr. Larry Romanelli, Ogema, Little River Band of Ottawa Indians

Ms. Jessica Burger, Acting Health Director, Little River Band of Ottawa Indians

Mr. Fred Kiogima, Tribal Chairman, Little Traverse Bay Band of Odawa Indians

Ms. Sharon Sierzputowski, Health Director, Little Traverse Bay Band of Odawa

Mr. DK Sprague, Tribal Chairman, Match-E-Be-Nash-She-Wish Potawatomi Indians (Gun Lake Band)

Ms. Phyllis Davis, Health Director, Match-E-Be-Nash-She-Wish Potawatomi

Mr. Homer Mandoka, Vice Tribal Chairman, Nottawaseppi Huron Band of Potawatomi Indians

Ms. Rosalind Johnston, Health Director, Huron Potawatomi Inc.- Tribal Health Department

Mr. John Warren, Tribal Chairman, Pokagon Band of Potawatomi Indians

Mr. Matt Clay, Health Director, Pokagon Potawatomi Health Services

Mr. Steve Pego, Tribal Chief, Saginaw Chippewa Indian Tribe

Mrs. Karmen Fox, Executive Health Director, Nimkee Memorial Wellness Center

Mr. Aaron Payment, Tribal Chairman, Sault Ste. Marie Tribe of Chippewa Indians

Ms. Bonnie Culfa, Health Director, Sault Ste. Marie Tribe of Chippewa Indians - Health Center

CC: Leslie Campbell, Region V. CMS

Pamela Carson, Region V, CMS

Ashley Tuomi, MHPA, Executive Director, American Indian Health and Family Services of Southeastern Michigan

L. John Lufkins, Executive Director, Inter-Tribal Council of Michigan, Inc.

Jenny Jenkins, Acting Area Director, Indian Health Service - Bemidji Area Office

Lorna Elliott-Egan, MDCH